

## ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS | ID NO. | DATE     |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION         | KH       | 20541  | 2/21     |
| O.I.P.E. CLASSIFIER       | C        |        | 1/21/01  |
| FORMALITY REVIEW          | HA       | 252    | 08-30-00 |
| RESPONSE FORMALITY REVIEW | LH       | 6-105  | 2-13-01  |

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

| Claim    | Date    |
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| Final    |         |
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| Claim    | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
stapl additional sheet h re

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